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Under the Paperwork Reduction Act of 1995, no persons are require		Application Number	09/843,279
TRANSMITTAL FORM		Filing Date	4/24/2001
		First Named Inventor	M. Klvanc Mihcak
		Group Art Unit	2132
(to be used for all correspondence after initial filing)		Examiner Name	JUNG W KIM
Total Number of Pages in This Submission		Attorney Docket Number	M\$1-792US
ENCLOSURES (check all that apply)			
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declarati Extension of Time Requ Express Abandonment B Information Disclosure S Certified Copy of Priority Documents Response to Missing Pa Incomplete Application Response to Miss under 37 CFR 1.53	Licen Petiti Petiti Provi Char Addn Request Statement Request	on to Convert to a sional Application er of Attorney, Revocation ige of Comespondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Natice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name Signature Date Kasey C. Christie Reg. No. 40559			
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WARNING: Information on this form may become public. Gredit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** SEARCH FEES FILING FEES Small Entity Small Entity Small Entity Fees Paid (\$) Fee (\$) Fee (5) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) 200 100 500 300 150 250 Utility 65 100 50 130 100 200 Design 160 80 300 150 100 200 Plant 600 300 500 250 150 Reissue 0 200 100 Provisional Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Multiple Dependent Claims Total Claims Extra Claims Fee Paid (\$) Fee (\$) 50 0 HP = highest number of total claims paid for, if greater than 20 Fee Paid (\$) Extra Claims Fee (\$) Indep, Claims 200 _0 - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Extra Sheets Total Sheets _ (round up to a whole number) 🛛 🗴 - 100 -Fees Paid (\$) 4. OTHER FEE(S) \$130 fee (no small entity discount) Non-English Specification,

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SUBMITTED BY Telephone (509) 324-9256 Registration No. 40559 Signature (Attorney/Agent) Date Name (Print/Type) Kasey Z. Christie

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PLL

 Application Serial No.
 09/843,279

 Filing Date
 4/24/2001

 Inventorship
 Mihcak et al.

 Applicant
 2132

 Group Art Unit
 Kim, Jung

 Attorney's Docket No.
 MS1-792US

 Title: Derivation And Quantization Of Robust Non-Local Characteristics For Blind Watermarking

RESPONSE TO OFFICE ACTION DATED 11/8/2004

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